



## REQUEST FOR INCOME TAX CLEARANCE

REQUESTING DEPARTMENT/DIVISION: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Type of Clearance: ☐ New ☐ Renewal (Please submit 30 days prior to submitting bid or expiration date)

A. **To:**  
City of Detroit  
Income Tax Division  
Coleman A. Young Municipal Center  
2 Woodward Avenue, Ste. 512  
Detroit, MI 48226  
  
**Phone:** (313) 224-3328 or 224-3329  
**Fax:** (313) 224-4588

**For:**  
Individual or  
Company Name \_\_\_\_\_  
  
Address \_\_\_\_\_  
  
City \_\_\_\_\_  
  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
  
Telephone \_\_\_\_\_ Fax # \_\_\_\_\_  
  
E-mail Address \_\_\_\_\_

<b>B. Name of Chief Financial Officer/Authorized Contact Person</b> (include address if different from above)	<b>Telephone #</b> _____  <b>Fax #</b> _____
<b>Employer Identification or Social Security Number</b>	<b>Spouse Social Security Number</b>

**Nature of Contract** \_\_\_\_\_

**BID CONTRACT AMOUNT (if known):**  
**Labor:** \$ \_\_\_\_\_ **Material:** \$ \_\_\_\_\_

**Contract # (if known)** \_\_\_\_\_

**C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.**

**Check One:** ☐ Individual ☐ Corporation ☐ Partnership ☐ Estate & Trust

### INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

- Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above) ☐ Yes ☐ No
- Are you a student, and/or claimed as a dependent on someone else's tax return? ☐ Yes ☐ No
- Were you employed during the last seven (7) years? ☐ Yes ☐ No
- Were you a resident of Detroit during the last seven (7) years? ☐ Yes ☐ No

### CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

- Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS-4). ☐ Yes ☐ No
- Will the company have employees working in Detroit? ☐ Yes ☐ No
- Will the company use sub-contractors or independent contractors in Detroit? ☐ Yes ☐ No

### D. FOR INCOME TAX USE ONLY

**Has the contractor complied with the provisions of the City Income Tax Ordinance?**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: [www.detroitmi.gov](http://www.detroitmi.gov)

NOTE: An approved Income Tax Certificate may be used in multiple city wide departments that require a bid. **Please e-mail your completed request form (preferably in pdf format) to: [IncomeTaxClearance@detroitmi.gov](mailto:IncomeTaxClearance@detroitmi.gov)**